

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
O.I.P.E. CLASSIFIER	R50		3/8/01
FORMALITY REVIEW	Zm	927	04/04/01
RESPONSE FORMALITY REVIEW	M. H.	625	07-16-01

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## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 : ..... Restricted O ..... Objected

Claim	Date
Final	Original
1 ✓	5/28/01
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Claim	Date
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Claim	Date
Final	Original
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If more than 150 claims or 10 actions  
staple additional sheet here